Indiana State Police Methamphetamine Laboratory Occurrence Report This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date:	11/27/10	Address:	52019 C.R. 5
Case #:	24F32100		Elkhart, IN
County:	<u>E</u> lkhart		<u>46514</u>
Type of Laboratory Seizure (check one) Operational Lab		Scizure Location (check all that apply) Residence Hotel/Motel	
Chemic	al/Glassware/Equipment (only) te (only)	Outbuilding Vehicle	☐ Open – No Structure ☐ Other: Trash Can
Items Found: Location (bedroom, kitchen, open air, etc)			
(check all that apply) Lithium/Ammonia Reaction(s): Trash Can			
Red Phosphorous/Iodine Reaction(s):			
Flammable Solvents: <u>Trash Can</u>			
Water Reactive Metal (Lithium):			
🔯 Anhydrous Ammonia: <u>Trash Can</u>			
☐ Hydrochloric Acid Gas Generator(s):			
Corrosive Acid:			
Corrosive Base: Trash Can			
Other (item and location): Ammonium Nitrate (Trash C			
☐ Yes ⊠ No	er age 18 discovered (check one) (number present) port to Child Protective Services	☐ Ephedrin ☐ Retail/M	<u>e Information</u> c/Pscudoephedrine Tracking Log crehant Tip ll from other agency
This report is to be faxed to the following agencies that serve the location:			
Fire Depart	ment; CLEVELAND TWP VFD	Fax: <u>574-2</u>	
Health Dep	artment: Ľ‼k <u>hart</u>	Fax: <u>(574)</u> Fax: <u>n/a</u>	<u>269-2023</u>
Child Prote	ction Service: <u>n/a</u>	_ 	
For further information regarding this methamphetamine laboratory, contact Investigating Officer: Keith Bikowski Phone 574-546-4900			

^{**} This form is to be faxed to the Fire Department, Health Department and/or Child Protective Services Department fisted within 24 hours of scene processing.

^{***} This form is to be included with the case file, and a copy sent to the Clandestine Laboratory Team Leader for retention.